

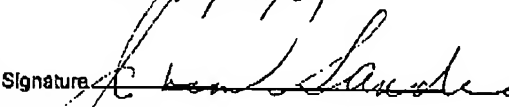
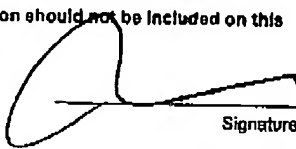
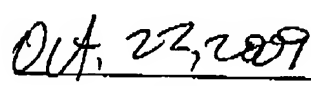
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I hereby certify that this correspondence is being transmitted via facsimile to "Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on <u>10/22/09</u>		In re Application of Jill Mac Donald Boyce, et. al.
Application Number 10/561,361		Filed December 19, 2005
Signature  Typed or printed name Joan Sanders		For Multipass Video Rate Control To Match Sliding Window Channel Constraints
Art Unit 2621		Examiner Roberts, Jessica M.
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision of the examiner.		
The fee for this Notice of Appeal is (37 CFR 41.20(b)(1))		\$ 540.00
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ _____ <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>07-0832</u> . I have enclosed a duplicate copy of this sheet. \$540.00 <input type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.		
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<input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) <input checked="" type="checkbox"/> attorney or agent of record. Registration number 32,711 <input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____		 Signature Jeffrey M. Navon Typed or printed name 609-734-6823 Telephone number  Date
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		

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PAGE 2/5 * RCVD AT 10/22/2009 9:20:28 AM [Eastern Daylight Time] * SVR:USPTO-EFXXF-5/15 * DNIS:2738300 * CSID:609 734 6888 * DURATION (mm-ss):01-26

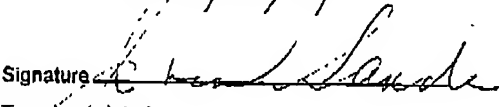
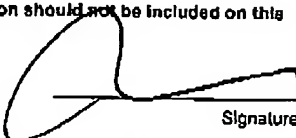
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